Barbara Campbell National Stage Processing (703) 305-3631

1								<b>-</b> r						
PATENT APPLICATION FEE DETERMINATION RECO							RD	Application or Docket Number						
_	Effective October 1, 2000								09/936559					
CLAIMS AS FILED - PART I (Column 1) (Colum						<u>u</u> mn 2)		SMALL ENTITY TYPE			OTHER THAN			
TOTAL CLAIMS					1	of the species.		RATE		OR 7		RATE FEE		
FOR			NUMBE	R FILED		NUMBER EXTRA		BASIC FEE		-		FEE		
TOTAL CHARGEABLE CLAIMS			27 m	27) minus 20=		. 7		XS 9=		OR	<b> </b>	1300		
INDEPENDENT CLAIMS			3 n					X40=		OR	<b></b>	126		
М	JLŢIPLĘ DEPE	NDENT CLAIM I	PRESENT							OR	X80=	<del> </del>		
- 11	the difference	e in column 1 is	less than a	ero, enter	"0" in	'0" in column 2		35=		OR	+270=			
• If the difference in column 1 is less than zero, enter "0" in column 2  CLAIMS AS AMENDED - PART II							TO	TAL	<u> </u>	OR	TOTAL			
_	(Column 1) (Column 2) (Column 3)						SM	ALL	ENTITY	OR	OTHER SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	ļ.	Minus	••		=	X\$	9=		OR	X\$18=	1 66		
	Independent	•	Minus	•••		=	X40	)-		1 1	X80=			
<u> </u>	FIRST PRESE	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM					OR	∧6U≡			
							+13	[		OR	+270=			
		(Caluma 4)					ADDIT.	FEE	····	OR ,	TOTAL ADDIT, FEE			
В		(Column 1) CLAIMS	30-11 1-3	(Colum		(Column 3)								
AMENDMENT		REMAINING AFTER AMENDMENT	The Control	NUMB PREVIO PAID F	USLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL _ FEE		RATE	ADDI- TIONAL FEE		
	Total	·	Minus	••		=	X\$ :	9=		OR	X\$18=			
	Independent FIRST PRESE	NTATION OF M	Minus		<u> </u>	=	X40	)=		OR	X80=			
		NOTATION OF MI	SCTIPLE DEI	PENDENT	CLAIM		+13	_		1 1				
						·		TAL	-	OR	+270=			
		(Column 1)		(Colum	n 2\	(Caluma 0)	ADDIT.	FEE <b>L</b>	·	OR ,	ADDIT. FEE			
ပ	· j	CLAIMS REMAINING	Contract Section	HIGHE	ST	(Column 3)			4001					
AMENDMENT		AFTER AMENDMENT	91.54 (4. 1884)	NUMB PREVIOU PAID F	JSLY	PRESENT EXTRA	RAT	E .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL		
2	Total		Minus	••		=	X\$ 9	=			X\$18=	FEE		
A P	Independent	•	Minus	•••		=	-			OR				
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		X40	-		OR	X80=			
. 11	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							=		OR	+270=			
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  TOTAL ADDIT. FEE  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														
п	ne "Highest Numi	ber Previously Paid	For (Total or	Independen	t) is the	highest number	lound in the	appr	opriate box	in colu	mn 1.			

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